

promoting the study of Natural History, by sending home specimens, would endeavour to procure all the information they can relating to such specimens as they may collect. . . . A neglect in procuring this information has left us, almost to this day, very ignorant of that part of the Natural History of animals which is the most interesting." And he goes on to say: "In collecting animals, even the name given by the natives, if possible, should be known; for a name, to a Naturalist, should mean nothing but that to which it is annexed, having no allusion to any thing else." It may be, therefore, that we are indebted indirectly to Hunter for the naming of the kangaroo for he doubtless impressed upon Sir Joseph Banks, his friend, the importance of discovering these native names. Banks was the naturalist on Cook's expedition and is credited with naming this animal "kangaroo," this being what he believed to be the word used by the Aborigines to refer to the creature. It has recently (1952) been suggested, however, that "perhaps a native cleared his throat at the critical moment and was thus unexpectedly immortalised," for no known Australian native dialect includes such a word.

THE NEW ANATOMICAL NOMENCLATURE

IN JULY OF 1955, in Paris, the Sixth International Congress of Anatomists approved a new official anatomical nomenclature. This revised list of anatomical terms differs from others issued previously in that it was compiled by an international committee and has now been accepted by anatomists for international use.

During the second half of the nineteenth century, a growing dissatisfaction with the multiplicity of anatomical terms in use prompted the first combined effort to provide a standard nomenclature, and a committee formed mainly of German-speaking anatomists drew up the list of terms known as the Basle *Nomina Anatomica*, more usually referred to as B.N.A. (1895). As an international anatomical language it met with varied acceptance. In Britain its adoption was gradual, by 1933 a definitive attitude towards it had been reached, and in that year a British Revision of the Basle *Nomina Anatomica* was published by the Anatomical Society of Great Britain and Ireland. At about the same time a German revision known as the Jena *Nomina Anatomica* was also issued. In addition, American anatomists, who had originally accepted the B.N.A. (1895), drew up a separate list. It should be made clear, however, that the work of the Basle N.A. Committee had been well done and that these were revisions, not wholesale replacements.

The first truly international committee to consider the matter was appointed in 1936 by the Fourth International Congress of Anatomists meeting at Milan, but its work was interrupted by the Second World War and it was not until 1950, when the Fifth International Congress

met at Oxford that the matter was taken up again. An International Anatomical Nomenclature Committee was set up, and the work of this Committee resulted in the Paris *Nomina Anatomica* of 1955. Although certain anatomical bodies were not represented on the Committee—notably those of India and Russia—it is to be hoped that this will be the last major revision and that it will be used, in time, locally as well as internationally.

In these days the advantages of a common language in a descriptive subject are obvious, and should eventually benefit other fields of medicine besides Anatomy. Naturally, it could not be evolved without the alteration of some current British terms, but major changes are few. One or two structures familiar in clinical practice are, however, affected. The circumflex nerve, for example, is now the axillary nerve, even though it quickly leaves the axilla and though its accompanying artery is still called the posterior humeral circumflex artery. The internal mammary artery becomes the internal thoracic artery. The accessory nerve, which has always been a little troublesome, is now described as having an internal branch (cranial part), and an external branch (spinal part). The moderator band of the right ventricle is to be known officially as the trabecula septomarginalis, and certain details of the heart valves are changed—why, one is not very sure. At present, in British textbooks, it is usual to name the cusps of the pulmonary valve posterior, right, and left; in the new list they are given as anterior, right, and left. Similarly the cusps of the aortic valve have been changed from anterior, right, and left to posterior, right and left. One feels, also, that there is a lack of uniformity about the terms used for the mitral and tricuspid valves. In the former, the cusps are named anterior and posterior, in the latter, ventral, dorsal and septal. The nerve to serratus anterior, like the circumflex and accessory nerves, reverts to its original B.N.A. form of long thoracic nerve, and the radial nerve is described as ending above the elbow joint by dividing into a superficial and a deep branch.

The addition of new terms is seen in the central nervous system and in the naming of the broncho-pulmonary segments, where the anatomists have recognised and followed the work of the clinicians in this special field. A similar recognition is made with regard to that part of the uterus known to obstetricians as the lower uterine segment. Its official anatomical name is now isthmus uteri.

As before, this latest official nomenclature is set out in Latin, but the Committee has taken the precaution of disarming pedantic criticism by putting on record . . . “that it was not desirable to lay stress on the etymological aspects of anatomical terminology,” and that . . . “on most questions of spelling, gender, etc., the Committee has usually chosen to accept established usage.” Where translation from the Latin is desirable—the names of muscles are almost all carried directly over into English—the Committee recognises that some latitude must be allowed to the

vernacular, and one awaits with interest the English term for the new name of the eighth cranial nerve—*nervus stato-acusticus*. No attempt has been made to establish a terminology for histology or embryology, and again, as in previous lists, eponyms have been deliberately omitted.

An opportunity to approve changes or additions will be given each five years at the International Congresses, and there has been a suggestion that a permanent Committee on Nomenclature would be helpful. To meet local circumstances, the publication in the standard textbooks of a glossary of the new terms, as was done after the British revision of 1933, would seem to be desirable and adequate.

The point which struck the present writer more than any other as he read through the new nomenclature was that a name has now been found for the Artery Without a Name. One has often wondered why a vessel which supplies one-eighth, let us say, of the body with blood should have been called the innominate artery, or, what sounds even more casual to English ears, the B.N.A. (1895) term—*Arteria Anonyma*. Now it is to be called the brachio-cephalic trunk—not an elegant name perhaps, but at any rate, “*nomen proprium*,” a name of its own. And so, however much the old deplore the passing of Poupart and Magendie, Santorini and Vesalius, and the young complain during the years of change-over, and the cynics whisper that it does not much matter what things are called as long as everyone calls them the same—while all these may be, one feels that with the introduction of *Nomina Anatomica*, Paris, 1955, and the granting of a name to the innominate artery, at least one long-standing wrong has been righted.

R.M.L.

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